The Emergence of Hajj Stampedes: Lessons for Draw Near in the Islamic Values in Hajj Trauma Centers Accreditation

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Abstract

Context: The pilgrimage occurs from the 8th to 12th or 13th of Dhul-Hijjah, the last month of the Islamic calendar, with a population of more than 2 million pilgrims in Mecca. Muslims have a series of verdicts in an appealing scenario such as Abraham the prophet. The Hajj pilgrimage is one of the most important verdicts in not only Islam but also all of the Abrahamian religions. Hajj is the 2nd largest annual community in the world after the Arbaeen pilgrimage in Karbala. Many of the health risk factors during the Hajj occur and alert us regarding forecast and control. The Islamic countries confront to this catastrophic event and need to proper standards, protocols for health service. Evidence Acquisition: 17 numbers of available papers pertaining to the Hajj pilgrimage from 2000 to 2016 were aggregated, coded and used in the current study. There were many libraries and online sources used during this study such as the ISI web of knowledge, Scopus, Google Scholar, Google, PubMed, MEDLINE, Wiley, Highwire and EMBASE. The search strategy was the Hajj pilgrimage and trauma centers or Islamic ethics, Islamic rights, Islamic verdicts and accreditation. The paper is managed by Thomson Reuter EndNote software. Two review authors independently assessed all of the papers. Results: On average 1,379,500 pilgrims from 188 different countries as well as 800,000 from Saudi Arabia visited Mecca every year. The health risk factors classified into categories included communicable and noncommunicable diseases. In total 2,431 people died and 427 were missing from 42 countries according to latest reports of the Hajj 2015 stampede. Conclusions: Recent studies pertaining to Hajj had emphasized to standard reforms on it. In addition some of them had pointed to the Islamic values approach to accreditation for Hajj trauma centers based on the justified standard systems.

Keywords: Hajj Pilgrimage, Hajj Trauma Centers Accreditation, Islamic Ethics, Islamic Rights, Islamic Verdicts

1. Context

1.1. The Hajj Pilgrimage

The Hajj pilgrimage occurs from the 8th to 12th or 13th of Dhul-Hijjah (the last month of the Islamic calendar) in 1438 Hijri (10 - 14 September 2016). It is one of the biggest gatherings worldwide and because of the population more than 2 million pilgrims are expected to arrive in Mecca (1). Pilgrims join the processions of Muslims who simultaneously converge on Mecca for the week during Hajj and related holy sites. Millions of Muslims retrace the footsteps of Prophet Mohammed, undertaking identical rituals. On arrival at Mecca, each pilgrim, makes seven circumambulations (Tawaf) around the Ka'aba (the building Muslims consider the house of God). Then he/she leaves for the Plain of Arafat, a few miles east of Mecca, where the Hajj culminates in the “Day of Standing”. The pilgrim makes overnight stops in Mina and goes to Arafat, and Muzdalifah when returning. On returning to Mina, the pilgrim stops at Jamart to stone the pillars that are effigies of Satan. The new Hajee (a pilgrim who has completed the Hajj) then makes an animal sacrifice as thanks for an accepted Hajj. Therefore, Muslims have a series of verdicts in an appealing scenario such as Abraham the prophet (2). The Hajj pilgrimage is one of the most important verdicts in not only Islam but also all of the Abrahamian religions. According to God's command, Muslims should visit the Hajj pilgrimage at least once in their life. Hajj is the 2nd largest annual community in the world after the Arbaeen Pilgrimage in Karbala (3).

1.2. Chronicle Panel of Hajj Disasters

According to early years and the disasters that are not hidden, so many health risk factors during Hajj have occurred which made us alert to forecast and control them (4). 1426 pilgrims were killed by stampede/asphyxiation in the tunnel leading to holy sites in 1990, 270 were killed in a stampede in 1994, 343 pilgrims died and 1,500 were injured in a fire in 1997, 189 pilgrims died in a stampede in 1998, 35 pilgrims died in a stampede in 2001, 14 pilgrims died in a stampede in 2003, 251 pilgrims died in a stampede in 2004, 76 pilgrims died after a hotel housing pilgrims collapsed and another stampede wounded 28 and killed 380 in 2006,
Forty-two nationalities were involved in the 2015 Hajj disaster. Hajj trauma disasters have increased in the recent 2 decades. The number of Muslims that are faced with traumatic events has become more and more in the recent years.

Although medical aspects regarding traumatic cases could be classified according to ICD-10-CM in chapters including Injury, poisoning and certain other consequences of external causes by standard codes such as S00-T88, external causes of morbidity and mortality by V00-Y99 standard codes, and so on; but we found less information by searching more in the available resources pertaining to the Hajj stampede in 2015.

All of the Islamic countries were involved in this catastrophic event in Hajj. The Hajj administration needs standard protocols regarding health services. Some studies pertaining to Hajj mentioned that it should have made new reforms (5-8). Thus, the current study was done with an approach to the Islamic values for the Hajj trauma centers accreditation based on the proper standard systems (5).

2. Evidence Acquisition

Seventeen numbers of available papers investigating the Hajj pilgrimage, cloud management, Hajj trauma centers, published from January 2000 to August 2016 were aggregated, coded and used in the current study. The libraries and online sources that were used included ISM web of knowledge, Scopus, Google Scholar, Lancet, PubMed, MEDLINE, Wiley, Highwire and EMBASE. The search terms that were used to identify these papers included Hajj pilgrimage, Hajj trauma centers accreditation, Islamic ethics, Islamic rights and Islamic verdicts. The search strategy was a combination of the following chain, Hajj pilgrimage and trauma centers, or Islamic ethics, Islamic rights, Islamic verdicts and accreditation. The papers obtained from different databases into the bibliographic software package EndNote were imported and updated into one complete database as well as also removing any duplicated references. Two review authors independently assessed all of the papers.

3. Results

The number of hazardous events in Hajj, based on the latest reports, had at least 1,379,500 international pilgrims who have arrived to Mecca and 800,000 who have travelled from Saudi Arabia. Pilgrims from abroad arrived from at least 188 different countries. Health risks in Hajj spread in many different ranges. Some of the most important of these factors that are classified in two categories included, communicable and noncommunicable diseases.

3.1. Communicable Diseases

According to this narrative review this class of disease Included respiratory tract infections, meningococcal disease, traveler’s diarrhea, skin infections, blood-borne diseases and emerging infectious diseases.

3.2. Noncommunicable Diseases

Noncommunicable diseases included cardiovascular diseases, trauma risks, fire-related injury, environmental heat injury and occupational hazards of abattoir workers.

The review of available papers shows that anyone dead and missing has not published. Hence the first finding was confirmed by gathering all of the broadcasted reports pertaining to the Hajj stampede in 2015 have been presented below (Table 1).

4. Discussion

Accreditation means systematic evaluation of health representing service with demonstrated health standards. These standards emphasize on continuous quality development, focusing on patients, staffs and patients’ security improvement.

4.1. Hajj Therapeutic Service Quality

Accreditation is utilized for determining the sanitary therapeutic service quality. Nowadays some unconventional and far from ethic and Islamic activities are more commonly observed amongst Muslim societies and it should be remembered that the consequences of these activities are severe in the future. In beliefs of the Muslims, Islam has revealed a complete guideline for its living followers. Hajj as a once in a lifetime obligation for Muslims and it attracts more than two million people every year. Individuals from different cultures and languages, crowdedness and massive movements (44) lead to the extreme congestion of people and vehicles during this time. Thus numerous health hazards and injuries such as pressing in overcrowding, sliding, burning, falling down, traffic accidents etc. happen frequently. In a previous study it was indicated that tissue contusions and ruptures (about 76/10000) and tendon lesions (about 62/10000) were the most common injuries during the Hajj ceremony. In addition, spraining an ankle (69/10000) was reported as the main injury during the five consecutive years (45). Due to the mentioned subject, being prepared for significant responses in confronting possible disasters is one of the
promising demands of Muslims. On the other hand, Muslim in their destinations, particularly Mecca, requested that their Islamic values are considered in the medical centers. Hijab, halal foods and medicines are prefect examples of Muslims requests that originate from Islamic verdicts. The Islamic republic of Iran’s hospitals can be mentioned as medical tourism samples that implement Islamic standards throughout the country at the acceptable average of 88.25 (46, 47).

4.2. Religions and Policy-Procedures

As the advancement of subjective well being or wellness is an important aim of both policy and procedures, better strategies derived from Islamic instructions are more likely expected from Muslims, so that clinical staffs responsible for their treatments can be trusted. Performing procedures based on ones religion is widely approached worldwide (especially Christian and Jewish) (48) however; very little research or literature discusses Muslim clients or their experiences. Muslims from different cultural values, gender role expectations and behavioral prescriptions have one mutual aspect in common, which is expecting Islamic ethics, rights and verdicts in their manners (49). It has been demonstrated that awareness amongst emergency practitioners regarding various spiritual and religious considerations affects the patients and families under their care during critical and sometimes life-changing events in their life (50). Proposed Islamic behavior in the clinical centers maximize the potential to achieve salutary outcomes such as faster recovery, better treatment compliance lower rates of relapse and reduced treatment disparities (51). This could be referred to spirituality, which can play a critical role in promoting wellness amongst Muslims, both directly and indirectly especially by reducing the level of depressive symptoms (52).

5. Conclusions

Travelers to Mecca face specific environmental hazards both through the physical environment and through the unique microbiological setting created there during the Hajj. According to the results, close attention to the Islamic values in Hajj trauma centers can promote the patients’ satisfaction and the quality. Hajj management is an overwhelming task and because of this an international collaboration needs to be done for multilateral planning. It’s not only health aspects but also the incorporation of Muslims beliefs and satisfactions in the Hajj. It has been emphasized to the Islamic ethics more than the others and some of these codes include treatment with the permission of Allah, intention of complying to god, patient compliance, spiritual aspects, emotional connection, communication with the patient, expression applies in practice, peace, morality, ethics for patient, patient safety, privacy, medical law, nurse rights, medical framework, Islamic human rights, basic rights, etc.
This concept includes ethics (soft aspects as a common sense of a flexible relationship), rights (by three vertices: Allah, person, people) and verdicts (judgmental statements by halal or haram). The Islamic values could be classified into a three layers cognitive model (53). Since the most important assets in a Hajj pilgrimage organization is to emphasize the implementation of Islamic values in Hajj management, the governments should pay more attention to the Islamic values for the huge community of Muslims with a large variation in both nationality and faith. The Hajj administration needs to be faced with these changes in both the beliefs and behaviors and need to try to find the best preparation in cross-cultural administration help for prevention of troubles. A great deal is that manageable problem should manage in health hazardous therefore focus on Islamic values in hajj trauma centers promotes the Muslims community satisfaction in Hajj trauma centers (Figure 1).

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